piication or Docket Number										
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000										
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL EN	√πτΥ □	OR	OTHER		(50 [7]
TOTAL CLAIMS	5	53			RATE	FEE	1	RATE	FEE	<u>v</u>
FOR	NUMBER	FILED I	NUMBER EXTRA		BASIC FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLA	IMS 53mir	nus 20= •	· 33		X\$ 9=		OR	X\$18=	594	
INDEPENDENT CLAIMS		inus 3 = *	1		X40=		OR	X80=	80	AVAILABLE
MULTIPLE DEPENDENT CLAIM PRESENT					+135=		OR	+270=	270	6
* If the difference in column 1 is less than zero, enter "0" in			" in column 2		TOTAL		OR	TOTAL	1659	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL I	ENTITY	OR	OTHER SMALL		
CLAI	AS .	HIGHES	Y			ADDI-)		ADDI-	_
REMAIL AFTE	R .	PREVIOUS	SLY EXTRA	P P	RATE	TIONAL-	1	RATE	TIONAL	
Total · 13	Minus	# 53	=		X\$ 9=	FEE	OR	X\$18=	FEC	
ind pendent • 2	Minus	4	8		X40=		OR	X80=		01400
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OH			
•			-claps	Δ <u>_</u>	+135=		OR	+270=		
ADDIT							OR	ADDIT, FEE		
(Column 1) (Column 2) (Column 3)										A
Total Johnson Control of Control	NING R	PAID FO	R PRESEN		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total .13	Minus	:13	=/		X\$ 9=		OR	X\$18=		
Independent • 2	Minus	3) =	オ	X40=		1	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR			1
BEST AVAILABLE COPY					+135=		OR	+270= TOTAL		
331 1							JOR	ADDIT. FEE		4
(Colun		(Column		3	_		•			4
CLAI REMAIL AFTI AMEND Total Independent	NING PR	NUMBE PREVIOU PAID FO	PRESEN		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus	••	z		X\$ 9=		OR	X\$18=		
Independent •	Minus	•••	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					-		1		+	-
A Michigan Lander Company of the Lander than the colors to entire the colors of the co							OR	+270⊐ TOTA		₹ i
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT. FEE										
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

FORM PTO-675 (Rev. 8/00)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE *U.S. GPO: 2000-460-706/30103